AMENDED IN SENATE JULY 1, 2003 AMENDED IN SENATE JUNE 19, 2003 AMENDED IN ASSEMBLY JUNE 2, 2003 AMENDED IN ASSEMBLY JANUARY 29, 2003

CALIFORNIA LEGISLATURE—2003-04 REGULAR SESSION

ASSEMBLY BILL

No. 23

Introduced by Assembly Member Nation

December 2, 2002

An act to add Section 139 to the Health and Safety Code, relating to breast cancer.

LEGISLATIVE COUNSEL'S DIGEST

AB 23, as amended, Nation. Breast cancer.

Existing law establishes the Office of Women's Health within the State Department of Health Services. The functions of the office include, among others, to communicate and disseminate information and perform a liaison function within the department and to providers of health, social, educational, and support services to women.

Existing law also provides for various programs related to the prevention and treatment of breast cancer.

This bill would create the Mammography Patient Best Principles, that includes prescribed expectations of mammography patients.

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

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The people of the State of California do enact as follows:

SECTION 1. The Legislature finds and declares all of the following:

- (a) The United States Congress enacted the Mammography Quality Standards Act of 1992 and subsequent legislation to ensure that all women have access to quality mammography for the detection of breast cancer in its earliest, most treatable stages.
- 7 (b) It is the policy of the State of California to ensure 8 compliance and enforcement of the *state Mammography Quality* 9 Assurance Act of 1992 (Chapter 870 of the Statutes of 1992), the 10 federal Mammography Quality Standards Act of 1992, and the 11 Mammography Quality Standards Reauthorization Act of 1998 12 (42 U.S.C. Sec. 263b), and the federal Food and Drug 13 Administrations FDA's Administration's (FDA's) Mammography 14 Quality Assurance Program, as an avenue to reduce the morbidity 15 and mortality associated with breast cancer.
 - (c) While advances have been made in the treatment of breast cancer, these advances are enhanced with early detection of breast cancer. Early detection combined with improvements in treatment has led to a 25 percent drop in the rate of death from breast cancer in the state. Early detection is more likely when multiple methods, including mammography, but also self-examination and clinical breast examinations, are used.
 - (d) Health care providers are encouraged to provide the Mammography Patient Best Principles to their patients. practice, and provide care to their patients, in accordance with the Mammography Patient Best Principles established pursuant to this act.
- 28 (e) The collaborative nature of health care requires that patients participate in their care.
 - SEC. 2. Section 139 is added to the Health and Safety Code, to read:
- 139. (a) This section shall be known and referred to as the Mammography Patient Best Principles.
 - (b) A patient should expect considerate and respectful care in a safe environment.
- (c) A patient should expect privacy in accordance with the
 federal Health Insurance Portability and Accountability Act of
 1996 and applicable state law. Mammography consultation,

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procedures, and discussions should be conducted to protect patient privacy. A patient should expect that her-a health care provider will treat all communications and records pertaining to her care confidentially, except as otherwise required or permitted by law.

- (d) A patient should expect to have a health care provider explain that mammograms are not a treatment, but a diagnostic tool that may detect cancer already developed in breast tissue. A patient should expect to decide, in consultation with her the health care provider, whether to have a mammogram.
- (e) A patient may request relevant, current, and understandable information about mammography from her—the health care provider. A patient may discuss available information related to mammography, the risks involved, and any medically reasonable alternatives to existing procedures, along with the accompanying risks and benefits. A patient may request educational materials on breast cancer risk factors and other information, including, but not limited to, information regarding breast self-examinations, mammography, and recommended timing of mammograms.
- (f) A patient may request the identity of the health care providers involved in her that patient's care. A patient may confirm request that a qualified radiologist read her that patient's mammogram.
- (g) A patient may discuss any radiation concerns with a health care provider or technician.
- (h) A patient may examine and obtain a copy of her *or his* medical records, including, but not limited to, mammography results, in accordance with state and federal law.
- (i) A patient may request the name, and contact information for, the state agencies responsible for overseeing public health issues if she *or he* wishes to make a complaint. A patient may request be informed of information regarding available resources for resolving disputes, grievances, and conflicts.